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NOTICE OF FILING/CLAIM FEE(S) DUE
TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS
FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: 8/989,352

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101				<input checked="" type="checkbox"/>	<u>790⁰⁰</u>
Total Claims > 20	203/103	<u> </u> - 20 = <u> </u>	X		<input checked="" type="checkbox"/>	<u>836⁰⁰</u>
Independent Claims > 3	202/102	<u> </u> - 3 = <u> </u>	X		<input checked="" type="checkbox"/>	<u>246⁰⁰</u>
Multi Dep Claim Present	204/104					
Surcharge	205/105				<input checked="" type="checkbox"/>	<u>130⁰⁰</u>
English Translation	<u>139</u>					
TOTAL FEE CALCULATION						<u>2002⁰⁰</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 2002⁰⁰

Less Filing Fees Submitted - \$ - 0 -

BALANCE DUE = \$ 2002⁰⁰

Doris M. King
Office of Initial Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

8/989,352

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	58 minus 20 =	* 38
INDEPENDENT CLAIMS	6 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
	395.00	OR		790.00
x\$11=		OR	x\$22=	836.00
x41=		OR	x82=	246.00
+135=		OR	+270=	
TOTAL		OR	TOTAL	1872.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*		Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x41=		OR	x82=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

BEST AVAILABLE COPY

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*		Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x41=		OR	x82=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*		Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x41=		OR	x82=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.